SUBMISSION OF ISSUE FEE PAYMENT	
Docket No.: TEX4542P0391US	Issue Batch No.: H35
Serial No.: 09/292,459	Filing Date: April 15, 1999
Group Art Unit: 1613	Examiner: T. Solola
Applicant(s): Ian l. Scott	
l c ⁴	it The Binding of Integrins To Their Receptors

Assistant Commissioner For Patents Box Issue Fee Washington, D.C. 20231

Sir:

Attached is the Issue Fee Transmittal Form No. PTOL-85b and a check in the amount of \$605.00 for the Issue Fee relating to the issuance of the above-identified U.S. patent application under 35 CFR §1.18.

The Commissioner is authorized to charge payment of any deficiency in the patent Issue Fee or credit any overpayment to Deposit Account No. 04-1644. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

Martin L. Katz, Reg. No. 25,01

Rockey, Milnamow & Katz, Ltd. Two Prudential Plaza 180 North Stetson, Suite 4700 Chicago, Illinois 60601 (312) 616-5400

CERTIFICATE OF MAILING

I hereby certify that this Issue Fee Transmittal, Form No. PTOL-85b, and attached Issue Fee Check relating to issuance of the above-identified U.S. patent application are being enclosed in an envelope deposited with the United States Postal Service with sufficient postage at First Class Mail in an envelope addressed to: Box Issue Fee, Assistant Commissioner for Patents, Washington, D.C. 20231 on April 18, 2000.

Susan Matz

PART B—ISSUE FEE TRANSMITTAL Camplete and mail this form, together with app le fees, to: **Box ISSUE FEE** Assistant Commissioner for Pate Washington, D.C. 20231 MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 1 through 4 should be completed with the propriate. All further correspondence including the Issue Fee Note: The certificate of mailing below can only be used for domestic mailings of the Issue Fee Transmittal. This certificate cannot be used Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to the current for any other accompanying papers. Each additional paper, such as an correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) assignment or formal drawing, must have its own certificate of mailing. specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for **Certificate of Mailing** maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1) I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on HM12/0127 the date indicated below. ROCKEY, MILNAMOW & KATZ LTD. TWO PRUDENTIAL PLAZA - SUITE 4700 180 NORTH STETSON AVENUE Susan Matz (Depositor's name) CHICAGO IL 60601 (Signature) <u> April 18</u> (Date) **EXAMINER AND GROUP ART UNIT** APPLICATION NO. **FILING DATE TOTAL CLAIMS** DATE MAILED 09/292,459 04/15/99 010 SOLOLA, 01/27/00 1613 First Named **Applicant** SCOTT, 35 USC 154(b) term ext. 0 Days. TITLE OF COMPOUNDS THAT INHIBIT THE BINDING OFINTEGRINS TO THEIR RECEPTORS INVENTION ATTY'S DOCKET NO. **CLASS-SUBCLASS** BATCH NO. APPLN. TYPE SMALL ENTITY **FEE DUE** DATE DUE 1 514-382.000 H35 UTILITY YES \$605.00 04/27/00 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Use of PTO form(s) and Customer Number are recommended, but not required. (1) the names of up to 3 registered patent Rockey, Milnamow & Katz, Ltd attorneys or agents OR, alternatively, (2) the name of a single firm (having as a \square Change of correspondence address (or Change of Correspondence Address form member a registered attorney or agent) PTO/SB/122) attached. and the names of up to 2 registered patent ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached. attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) 4a. The following fees are enclosed (make check payable to Commissioner PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. of Patents and Trademarks): Inclusion of assignee data is only appropiate when an assignment has been previously submitted to √ Issue Fee the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for ☐ Advance Order - # of Copies _ filing an assignment. Texas Biotechnology Corporation, Ind (A) NAME OF ASSIGNEE Houston, Texas 4b. The following fees or deficiency in these fees should be charged to: (B) RESIDENCE: (CITY & STATE OR COUNTRY) DEPOSIT ACCOUNT NUMBER _ 04-1644 (ENCLOSE AN EXTRA COPY OF THIS FORM) Please check the appropriate assignee category indicated below (will not be printed on the patent) individual corporation or other private group entity government government ☐ Advance Order - # of Copies The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above. (Authorized Signature) (Date) 04/24/2000 KZEWDIE1 00000044 09292459 04/18/2000 01 FC:242 NOTE; The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney 605.00 OP or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office. Martin L. Katz, Reg. No. 25,011 Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for

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